	ENERAL INFORMATION What kind of job are you applying for? Give title and announcement no. (if any)					o. (if					E IN THIS A MINING OFF		
•							-	Date entered	register	Form revie			
2	Social Security Number	3			٦		-			гонн аррі			
4	Birth date (Month, Day, Yea	ar) 5	Birthplac		Female nd State or 0	Country)	_	Option	Grade	Earned Rating	Veteran Preference	Augmented Rating	
6	Name (Last, First, Middle)						-				No Preference Claimed		
U											5 Points (Tentative)		
	Mailing address (include ap	artment nu	ımber, if a	iny)							10 Pts. (30% Or More		
	City			s	tate ZIP	Code	-				Comp. Dis.) 10 Pts. (Less Than 30%		
7	Other names ever used (e.g	ı., maiden ı	name, nic	kname, e	tc.)						Other 10 Points		
•							_	Initials and Da	ate	'	Disallowed	Being Investigated	
8	Home Phone	9	Work Ph					,	FOR US	E OF APP	OINTING OFF	FICE ONLY	
	Area Code Number		Area Code	Number		Extension		Pre	ference ha	s been verifie	d through proof th	at the separation	
40	\\\\		46 - 5	11 0		NO!				norable cond 0-Point 30% or	itions, and other p More 10-Point	Less Than 30%	10-Point
10	Were you ever employed as go to Item 11. If "YES", ma					NO",		5-Point		Compensable Disa		able Disability	Other
	Townson, C	r. Cand	litional	Corr	🗆 -	veented		Signature and	i i itie				
	Temporary Care What is your highest grade	areer-Cond		Care		xcepted							
	What is your mghost grade	, ciassilica	tion sone	and job i	iiio:		-	A =====				Data	
								Agency				Date	
	Datas at himbant avada. El	OM.		TC	`								
	Dates at highest grade: FF	KOWI.		10	,								
A \ /	ALL ADILITY						IVII	LHARTS	EKVICI	- AND VI	TEKAN PK		
AV.	AILABILITY	4.0 14/1				10	(C						
11	When can you start work? (Month and Year)	12 Wha	at is the io u will not b	west pay be consid	you will acce	ept? s <i>which</i>	19	conditions?	(If your dis	om me milita charge was	ry service under h	rable" or YES	NO
	(Monar and Today		less than								oard, answer "YE		
		Pay \$		per	OR Grad	de					, answer "NO".) I ischarge you rece		
13	In what geographic area(s)		ling to wor					Discharg	e Date		Type of Dis		
14	Are you willing to work:				YES	NO	20	List the dates			nd branch for all ac		
	A. 40 hours per wee	k (full-time))?					Froi	m	То		Branch of Servi	ce
	B. 25-32 hours per v												
	C. 17-24 hours per v						24	If all your on	tivo militon	, duty was of	ter October 14, 19	076 list the full p	omm on
	D. 16 or fewer hours						Z I				xpeditionary med		
	E. An intermittent jol							entitled to red	ceive.				
	F. Weekends, shifts	•			-								
15	Are you willing to take a ten						00						
IJ	A. 5 to 12 months (s						22				vith this form bef our eligibility for ve		
	B. 1 to 4 months? _										next to your vetera		
	C. Less than 1 mont							NO DD	EFERENC	_			
4 6													
0	Are you willing to travel away from home for: A. 1 to 5 nights each month?										u must show proof	•	
											you claim 10-poin sis for your claim.		
	B. 6 to 10 nights each								ence you r	nust also co	mplete a Standa	rd Form 15,	oint
N ALL	C. 11 or more nights								ation for 1				
	ITARY SERVICE A		th?					Applicany Fe	deral Job	Information	eran Preference, Center. ATTACI	H THE COMPLE	ole from
17			th?					Applicany Fe	deral Job	Information	Center. ATTACI F TO THIS APPLI	H THE COMPLE	ole from
	Have you served in the Unit		th? TERAN	PREF		NO		Applicany Fe	deral Job D REQUES	Information TED PROO	Center. ATTACI	H THE COMPLE CATION.	ole from
	Have you served in the Unit your only active duty was to National Guard, answer "N	ed States I aining in th	th? FERAN Military Se	PREF ervice? If res or	YES			Applicany Fe 15 ANI Non-co	deral Job D REQUES impensably insably disa	Information TED PROOF disabled or abled, less th	Center. ATTACI F TO THIS APPLI Purple Heart recip an 30 percent.	H THE COMPLE CATION. ient.	ole from
18	your only active duty was to	ed States It raining in th O". If " NO "	TERAN Military Sene Reserv , go to ite	PREF ervice? If yes or m 22	YES			Applicany Fe 15 ANI Non-co	deral Job D REQUES impensably insably disa	Information TED PROOF disabled or abled, less th	Center. ATTACI F TO THIS APPLI Purple Heart recip	H THE COMPLE CATION. ient.	ole from

3	qualifications. If you an first								l l			
 READ WORK EXPERIENCE IN THE INSTRUCTIONS BEFORE YOU BEGIN. Describe your current or most recent job in Block A and work backwards, describing each job you held during the past 10 years. If you were unemployed for longer than 3 months within the past 10 years, list the dates and your address(es) in an experience block. You may sum up in one block work that you didmore than 10 years ago. But if that work is related to the type of job you are applying for, describe each related job in a separate block. INCLUDE VOLUNTEER WORK (non-paid work) If the work (or a part of the work) is like the job you are applying for, complete all parts of the experience block just as you would for a paying job. You may receive credit for work experience with religious, community, welfare, service, and other IF YOU NE IF YOU NE 							CLUDE MILITARY SERVICE You should complete all parts of the serience block just as you would for a non-military job, including all servisory experience. Describe each major change of duties or ponsibilities in a separate experience block. YOU NEED MORE SPACE TO DESCRIBE A JOB Use sheets of pasame size as this page (be sure to include all information we ask for IB below). On each sheet show your name, Social Security Number announcement number or job title. YOU NEED MORE EXPERIENCE BLOCKS, use the SF 171-A or a spaper.					
٨	Name and address of employe	er's organizatio	on (include ZIP	Code, if known)	Dates employed	(give month,	day and year)	Average number of hours per week	Number of ees you su	emplo pervise	y-)	
					Salary or earning Starting \$ Ending \$	s per per		Your reason for war	ting to leave			
	Your immediate supervisor Name	Area Code	Telephone No.	Exact title of your jo		po.	If Federal emp grade or rank, last promotion	l loyment <i>(civilian or n</i> and, if promoted in th	nilitary) list se nis job, the da	eries, ate of y	our	
_		 	 			 				 	_ _ _ _ _	
	Name and address of employe	er's organizatio	on (include ZIP	Code, if known)	Dates employed	_	day and year)	For Agency Use Average number of hours per week	(skill codes			
	Name and address of employe	er's organizatio	on (include ZIP	Code, if known)	From: Salary or earning Starting \$	To:	day and year)		Number of ees you su			
Y	Your immediate supervisor Name	Area Code	Telephone No.	Exact title of your jo	From: Salary or earning Starting \$ Ending \$	To: s per per	If Federal emp grade or rank, last promotion	Average number of hours per week Your reason for leavelength of the second sec	Number of ees you su sing nilitary) list se is job, the da	emplo pervise eries, ate of ye	y- ed oui	
Y	Your immediate supervisor	Area Code	Telephone No.	Exact title of your jo	From: Salary or earning Starting \$ Ending \$	To: s per per	If Federal emp grade or rank, last promotion	Average number of hours per week Your reason for leavelength of the second sec	Number of ees you su sing nilitary) list se is job, the da	emplo pervise eries, ate of ye	y- ed our	
_ Y	Your immediate supervisor Name	Area Code	Telephone No.	Exact title of your jo	From: Salary or earning Starting \$ Ending \$	To: s per per	If Federal emp grade or rank, last promotion	Average number of hours per week Your reason for leavelength of the second sec	Number of ees you su sing silitary) list se is job, the da supervised ou spent doi	ernies, ate of your of	y- ed our	

WORK EXPERIENCE. If you have no work experience, write "NONE" in A below and go to 25 on page 3.

EDI	UCATION													
25	Did you graduate from high school? If you have a GED equivalency or will graduate within the next nine mont) high schoo hs, answer	ol " "YES" .	26	Write the where you	name a u obtain	and locati ned your	ion <i>(city ai</i> GED high	nd state) of school eq	f the last hi uivalency.	gh school you	attende	ed or	
	If "YES", give month and year graduated or received GED equivalency: If "NO", give the highest grade you				· Have you ever a		attended		YES If "YES		5", continue with 28.			
	NO If "NO", give the highest grade you completed:			27	college or	gradua	ta aabaa12 —		Ю	If "NO"	, go to 31.			
28	NAME AND LOCATION (city, state and ZIP Code) OF graduate within nine months, give the month and yea	COLLEGE r you expe	OR UNIVE ct to receive	RSITY. e your d	If you exp degree:	ect to	ATTENDED		NUMBER OF CREDIT HOURS COMPLETED		DEGILL	MONTI YEAF	R OF	
	Name	(City	State	ZIP Co	de			Semester	Quarter	(e.g.B.A., M.A.)	DEGREE		
	1)													
	2)													
	3)													
29	CHIEF UNDERGRADUATE SUBJECTS Show major on the first line	NUMBER OF CREDIT HOURS COMPLETED Semester Quarter		30			CHIEF GRADUATE SUBJECTS Show major on the first line					NUMBER OF CREDITED HOURS COMPLETED Semester Quarter		
	1)			1	1)									
	2)				2)									
	3)				3)									
31	If you have completed any other courses or training rebelow.	elated to t	ne kina of				•	ie, vocatio	onai, Arme	a Forces, I	ousiness) give			
	NAME AND LOCATION (city, state and ZIP Cod	le) OF SCH	e) OF SCHOOL		H AND YEA TENDED	R CLAS ROO HOUF	M		SUBJECT(S)				TRAINING OMPLETED (ES NO	
	School Name			Fron	. 10	1.501							110	
	1)													

CDECIAL		ACCOMPLISHMENTS A	\mathbf{v}	$\Lambda \Lambda \Lambda \Lambda \Lambda DDC$
SPECIAL	\sim \sim \sim	ACCOMPLISHMENTS	41111	AVVARIJO

32 Give the title and year of any honors, awards or fellowships you have received. List your special qualifications, skills or accomplishments that may help youget a job. Some examples are: skills with computers or other machines; most important publications (do not submit copies); public speaking and writing experience; membership in professional or scientific societies; patents or inventions; etc.

ZIP Code

ZIP Code

State

State

33	How many words per minute can you:	34 List job-related licenses or certificates that you have, such as: registered nurse; lawyer; radio operator; driver's; pilot's; etc.										
	TYPE? TAKE DICTATION?	-	ICENSE OR C	ERTIFICATE			DATE OF LATEST LICENSE OR CERTIFICATE			STATE OR OTHER LICENSING AGENCY		
	Agencies may test your	1)	1)									
	skills before hiring	2)										
35	Do you speak or read a langua	age other than English(inclu	YES	If "YES",	list each langua	ige and place a	an "X" in each c	olumn that appl	ies to you.			
	language)? Applicants for jobs that require a language other than English may be given an interview conducted solely in thatanguage. If "NO", go						to 36.					
	LANGUA	GE(S)		CAN PREPARE AND GIVE LECTURES		AN SPEAK AND UNDERSTAND CAN TRANSLATE ARTICLES			CAN READ ARTICLES FOR OWN USE			
		Fluently	With Difficulty	Fluently	Passably	Into English	From English	Easily	With Difficulty			
	1)											
	2)											
REF	FERENCES											

36 List three people who are not related to you and are not supervisors you listedunder 24 who know your qualifications and fitness for the kind of job for which you are applying. At least one should know you well on a personal basis. TELEPHONE NUMBER(S) PRESENT BUSINESS OR HOME ADDRESS FULL NAME OF REFERENCE STATE ZIP CODE (Include Area Code) (Number, street and city) 1) 2) 3)

City

City

School Name

37	Are you a citizen of the U	nited States? (In most cases you must be a ou are hired.) If "NO", Give the country or co	U.S. citizen to be hired. You wil	I be required to submit proof of identity and	YES	NO			
in Ite befor convi	em 45. Include conviction re your 16th birthday; 3) a iction set aside under the F der the date, facts, and circ	ns resulting from a plea of nolo contendere iny violation of law committed before your rederal Youth Corrections Act or similar St cumstances of each event you list. In most	(no contest). Omit: 1) traffic fir 18th birthday, if finally decided ate law; 5) any conviction whose cases you can still be considered	ou answer "YES" to any of them, provide your enes of \$100.00 or less; 2) any violation of law coin juvenile court or under a Youth Offender law; a record was expunged under Federal or State la for Federal jobs. However, if you fail to tell the you begin work, or for criminal prosecution (18)	ommitted (4) any w. We w e truth o	d vill or fail			
38 39	mutual agreement because of a specific problems? Have you ever been convicted of, or forfeited collateral for any felony violation? (Generally, a felony is defined as any violation of law punishable by imprisonment of longer than one year, except for violations called misdemeanors under State law which are punishable by imprisonment of two years or								
40 41 42	Have you ever been conv Are you now under charg During the last 10 years	victed of, or forfeited collateral for any firear ges for any violation of law? have you forfeited collateral, been convicted	ms or explosives violation?	ton, or been on parole? Do no t include					
43 44	U.S.	victed by a military court-martial ? If no mili ny Federal debt? (Include delinquencies ar	tary service, answer "NO " ising from Federal taxes, loans, c	verpayment of benefits, and other debts to the t					
45	39 throu 44 - Expl Give any	lain for each job the problem(s) and youngh 43 - Explain each violation. Give plain the type, length and amount of the tification number associated with the ded more space, use a sheet of paper, as	lace of occurrence and name, delinquency or default, and si	/address of police or court involved. teps you are taking to correct errors or repa	y the de	bt.			
	Item Date No. (Mo./Yr.)	Explanation	1	Mailing Address					
				Name of Employer, Police, Court, or Federal A	gency				
				City State	ZIP Code				
				Name of Employer, Police, Court, or Federal Agency					
				City State	ZIP Code	•			
46	Do you receive, or have y Government service?	rou ever applied for retirement pay, pension,	or otherpay based on military, Fe	deral civilian, or District of Columbia	YES	NO			
47	daughter; brother; sister; uncle; aunt; first cousin; nephew; niece; father-in-law; mother-in-law; son-in-law; daughter-in-law; brother-in-law; sister-in-law; stepfather; stepson; stepdaughter; stepbrother; stepsister; half brother; and half sister If "YES", provide details below. If you need more space, use a sheet of paper.								
		Name	Relationship	Department, Agency or Branch of A	rmed F	orces			
		CATION, AND RELEASE OF I	N 1						
•	A false statement on any imprisonment (U.S. Cod If you are a male born af Federal employment. Yo I understand that any ir I consent to the release individuals and organiz.	e, Title 18, section 1001). ter December 31, 1959, you must be registed will be required to certify as to your state aftermation I give may be investigated as all	or not hiring you, or for firing you ered with the Selective Service S us at the time of appointment. lowed by law or Presidential order for Federal employment by empires specialists, and other authorize	loyers, schools, law enforcement agencies and demployees of the Federal Government.	ligible fo				
48	SIGNATURE (Sign e	ach application in dark ink)		49 DATE SIGNED (Month, day, yea	r)				

BACKGROUND INFORMATION -- You must answer each question in this section before we can process your appliation.